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**TRIP REPORT: BOLIVIA EVALUATION,  
SECOND TRIP**

**DECEMBER 1-9, 1994**

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**FAMILY PLANNING MANAGEMENT DEVELOPMENT**

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## **I. EXECUTIVE SUMMARY**

Gail Price, Technical Associate, and Peggy Levitt, Evaluation Consultant, traveled to Bolivia from December 1 to December 9, 1994. The purpose of the trip was to collect updated information on the clinic performance and management systems at the Centro de Investigacion, Evaluacion, y Servicios (CIES) and the Caja Nacional de Salud (CNS) in preparation for the final Bolivia evaluation report. This information will be compared with other country evaluations in order to identify which FPMD interventions are most relevant and effective in different types of organizations. The lessons learned will be documented for dissemination in the field.

Ms. Price and Ms. Levitt conducted a series of interviews which first focused on activities carried out between November 1993 (the date that the technical review was completed) and December 1994. Secondly, a management questionnaire was administered to assess the management systems. Initial results of the interviews are summarized below. A more comprehensive analysis will be included in the final evaluation report for Bolivia.

### **CIES**

As a result of FPMD interventions, CIES has moved from an emergent organization to a stable organization, able to provide a significant portion of the family planning services in Bolivia. Most management systems are functional and CIES now meets almost all of the requirements to receive funding directly from USAID. CIES has the internal capability to complete short and long term planning exercises without outside assistance and now makes management decisions based on operational plans. FPMD helped CIES to change its institutional mission to focus on reproductive health and to institute quality standards. Finally, the client survey conducted by FPMD has provided valuable information to CIES about how their services are perceived by the clients and will serve as the basis for future management decisions.

### **CNS**

In a short period of time, FPMD has helped the CNS to make Reproductive Health Services an integral part of its mission and programmatic activities. The CNS has developed a Reproductive Health (RH) program structure with job descriptions, lines of authority, medical procedural norms. FPMD's seminar and workshops have helped the CNS to establish a program to improve the quality of services. This program is now underway.

The CNS RH program is still very vulnerable to political and attitudinal barriers. Many doctors and nurses are reluctant to participate in the program, because of religious beliefs or time constraints. Much work needs to be done in motivating and training doctors and nurses, and in creating systems to improve the management of services.

## **II. BACKGROUND**

As part of the final FPMD evaluation, Bolivia has been chosen as one of six countries or programs which will be the subject of in-depth evaluations. These country evaluations will assess both the individual subprojects and the overall impact that FPMD has had on the national program. The data gathered during this trip will serve as the basis for the Bolivia evaluation.

## **III. OBJECTIVES**

The purpose of the trip was to collect updated information on the clinic performance and management systems at the Centro de Investigacion, Evaluation, y Servicios (CIES) and the Caja Nacional de Salud (CNS) in preparation for the final Bolivia evaluation report. This information will be compared with other country evaluations in order to identify which FPMD interventions are most relevant and effective in different types of organizations. The lessons learned will be documented for dissemination in the field.

## **IV. METHODOLOGY**

Ms. Levitt and Ms. Price conducted individual and group interviews with managers of CIES' central and regional offices and three CIES clinics in La Paz and Oruro. They also interviewed three members of CIES' Board of Directors, as well as Nelson Giron, an IPPF consultant from Profamilia in Colombia working on CIES' financial management system. In addition, Sandra Wilcox, the former MSH Resident Advisor provided insights.

Ms. Levitt and Ms. Price conducted six interviews with CNS staff in La Paz and Oruro and with the Medical Director of the CNS.

The interviews with CIES and the CNS first focused on activities carried out between November 1993 (the date that the technical review was completed) and December 1994. Secondly, a management questionnaire was administered to assess the management systems. Initial results of the interviews are summarized below. A more comprehensive analysis will be included in the final evaluation report for Bolivia.

## **V. RESULTS**

### **CIES**

As a result of FPMD interventions, CIES has moved from an emergent organization to a stable organization, able to provide a significant portion of the family planning services in

**Bolivia.** Most management systems are functional and CIES now meets almost all of the requirements to receive funding directly from USAID.

*Quality:* The client survey conducted by FPMD has provided valuable information to CIES about how their services are perceived by the clients and will serve as the basis for future management decisions.

*Planning:* CIES has the internal capability to complete short and long term planning exercises without outside assistance and now makes management decisions based on operational plans.

*Mission:* FPMD helped CIES to change its institutional mission to focus on reproductive health and to institute quality standards.

*Organizational Structure:* To a large extent, clinic operations management has been decentralized, however, financial management is still centralized.

*Volume of Services:* CIES has generally maintained its 1993 service delivery levels. There was a slight decrease in new family planning visits. CIES method mix is more diverse.

*Quality:* CIES reorganized its Associated Doctors and Community-Based Distribution Program. Though the number of CYP's distributed has decreased, the quality of each of these services seems to have increased significantly.

*Information Systems:* A new service statistics system has been developed, implemented, and computerized.

*Financial System:* Though some progress has been made in this area, CIES financial systems still need work. Accounting is still done manually. Two out of five Tecapro (computerized financial management system) are at work.

## CNS

In a short period of time, FPMD has helped the CNS to make Reproductive Health Services an integral part of its mission and programmatic structure. Much work is still needed, however, to stabilize the program.

*Planning:* The CNS completed a strategic and operational plan.

*Organizational Structure:* The CNS developed a Reproductive Health (RH) program structure with job descriptions, lines of authority, medical procedural norms.

*Mission:* It is now obligatory for all CNS doctors to provide RH services. Many more doctors participate in the program than they did last year.

***Service Delivery:*** Overall service delivery levels have increased. Performance varies widely by clinic.

***Quality:*** Focus group findings revealed that the CNS clients generally felt there was much room for improvement in the quality of care they receive; doctors are slightly better viewed than other providers.

***Outreach:*** Focus groups also showed that many people do not know that the CNS provides RH health services. The concept of RH is also unclear to many clients.

***Sustainability:*** The CNS RH program is still very vulnerable to political and attitudinal barriers.

## **Annex 1: Interviews Conducted**

1. Lic. Ivan Prudencio Pol - Executive Director of CIES
2. Elia Perez - CIES Management Information Systems' Supervisor
3. Patricia Saenz - CIES Finance Director
4. Lic. Fernando Careaga - CIES Marketing Director
5. Dr. Jose Luis Duenas - CIES Director of Medical Services
6. Dr. Marcelo Farfan - Director of the Associated Doctors and CBD programs
7. Lic. Nelson Giron - IPPF Consultant
8. Dr. Rolando Pacheco - Regional Medical Director, CNS, Oruro
9. Dra. Lourdes Arratia - Coordinator of Reproductive Health Program, CNS, Oruro
10. Dr. Alberto Rivera - Doctor in Reproductive Health Program, CNS, Oruro
11. Rosario Cortez - Medical Director of CIES clinic Oruro
12. Maria Elena Burgoa - Educator, CIES clinic in Oruro
13. Nora Canaviri - Secretary/Cashier CIES clinic in Oruro
14. Dra. Cristina Renteria - National Reproductive Health Program Coordinator, CNS
15. Dr. Fernando Jurado - Medical Director CNS El Alto Clinic
16. Sandy Wilcox - former MSH resident representative
17. Dr. Miranda and staff - CNS clinic 9 de Abril
18. Bertha Pooley, Ruben Belmonte, Monica Nariaga - CIES Board of Directors
19. Dr. Sfeir - Medical Director of the CNS
20. Dra. Fabiola Arnado and staff - Director of CIES Vitalidad clinic
21. Dr. Alfredo Machicao - Director of CIES El Alto clinic

22. Dra. Malena Morales and staff - Director of CIES La Paz clinic

23. Rolf Stern - FPMD consultant